

CAN BE HELPED

National Association for Retarded Children, Inc.

99 UNIVERSITY PLACE . NEW YORK 3, NEW YORK . OREGON 4-0610

GUNNAR DYBWAD, J.D. Executive Director

March 25, 1959

MRS. FITZHUGH W. BOGGS

President
75 Edgemont Road
Upper Montclair, New Jersey

WALTER E. JOHNSON, JR.

1st Vice President
8211 Dover
Houston, Texas

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2nd Vice President
5743 Potomac Avenue N.W.
Washington, D.C.

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VINCENT J. FITZPATRICK Secretary 626 Topsfield Road Hatboro, Pennsylvania

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The Honorable John E. Fogarty Room 1133 House Office Building Washington, D. C.

Dear John:

Since I have not had the pleasure of seeing you during this session, I thought I would take this means of summarizing some of our concerns about Congressional legislation presently under consideration.

We are keenly aware of what your assistance has helped us achieve for the retarded child in the fields of clinical service and education; now attention must be given also to services for the young adult and adult retardate. For this reason, the vocational rehabilitation legislation is of major import to us in this session.

Your Bill H.R. 1119, the "Rehabilitation Act of 1959", thus constitutes the focal point of NARC's Legislative Program for 1959. Certainly, if enacted it may well become a cornerstone in a total program for the mentally retarded.

Since we feel that the Bill has such tremendous importance, we would like to suggest that it may be advisable to clarify in a few places the applicability of its provisions for the mentally retarded.

While the term rehabilitation facilities used in the preamble and throughout the Bill can be construed broadly to encompass any and all such programs for the retarded, present usage makes this questionable.

Allow me to exemplify: On page 16, line 10 Item (V) lists "adjustment training" as one of the types of services to be rendered by nonprofit rehabilitation facilities operated for the primary purpose of assisting in the rehabilitation of physically and mentally handicapped individuals.

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It has been our experience that vocational rehabilitation departments in the various States tend to place a rather limited interpretation on the phrase "adjustment training", namely helping a handicapped person adjust to a specific prosthetic device or vocational procedures.

However, in the care of the mentally retarded their "habilitation" must be preceded by preliminary training which prepares the individual to be ready for specific rehabilitative training. This refers to the provision of such basic things as work tolerance, personal habits, and independent travel which are known as personal adjustment training.

Therefore, we are asking that you consider adding on page 16, line 10 the word "personal" making Item (V) read "personal adjustment training".

I would not make this suggestion were it not for the fact that without inclusion of this broadening phrase, your Act will be construed so narrowly in at least a good number of the States as to exclude certain mentally retarded from its benefits even though they could become productive after suitable training.

May I also call to your attention that on page 8, line 12 the Bill speaks specifically of the "physically handicapped" whereas elsewhere throughout the Bill the term handicapped is not so limited. Am I right to presume that this is a clerical error which should be corrected so as not to give a basis for an interpretation unfavorable to the mentally retarded. It would then read "all eligible handicapped individuals".

Otherwise, we are strongly in support of H.R. 1119 and the appropriations which it recommends, and hope that we shall have an opportunity to so testify before the Committee considering the Bill. It stands to reason that we likewise want to support the budgetary request of the Office of Vocational Rehabilitation since the success of this new legislation will depend on adequate staffing in OVR central and regional offices.

The Honorable John E. Fogarty

March 25, 1959

From discussion you and I have had in previous years, you will know that we are more concerned about basic administrative support when it comes to the Bills affecting the U. S. Office of Education.

We are, of course, gratified that the Administration requested the full million dollar appropriation called for in PL 85926 which passed, thanks to your magnificent personal efforts. However, we are keenly aware that unless the Office of Education is enabled and, I may even say required, to strengthen its special education staff in a substantial way the result of last year's legislative victory not only may fall far short of what we hoped for but may, through inadequate administration, actually prove damaging in the long run.

We are very grateful that the mentally retarded were singled out in PL 85926 but as you know, we already suggested last year the inclusion of other handicaps in this Bill and certainly are looking forward to have the Act ammended in this respect next year. We are therefore aware how much will depend on sound administrative implementation of this Bill as otherwise the chance for broadening the legislation will be distinctly decreased.

We have been cognizant of these administrative inadequacies within the U. S. Office of Education as far as the Cooperative Research Program is concerned, the results of which have been quite disappointing to us. This does not mean that the original legislation has not proven its great value, it does mean that inadequate staffing has stood in the way of full accomplishment.

Furthermore, projects related to Mental Retardation have constituted during the past year an ever decreasing percentage of the total number of projects approved and the total monies allocated by the U. S. Office of Education under the Cooperative Research Program. This makes us wonder whether the earmarking of funds for Mental Retardation projects, which worked out so well in the beginning of the Cooperative Research Program, should not again receive consideration.

Certainly, it is obvious that in a field that has been neglected for so long we cannot expect results in just two or three years and hence, it is of the utmost importance that the stimulating influence of the Cooperative Research Project be maintained with a continuing emphasis on Mental Retardation as a long neglected field in particular need of attention.

While I am discussing the Office of Education let me refer to the Defense Education Act. I have heard some discussions as to whether or not this Act has any implications for Mental Retardation. May I just say that just as the U.S. Army during World War II utilized with excellent results special training sections for mentally retarded draftees, many of whom later on served in the front lines, so it would seem essential that in the event of total mobilization we can draw the maximum number of retardates into our working force. That obviously means that we must be sure to have an adequate number of teachers to train these individuals. Perhaps it is not amiss to surmise that this is in part the reason for Soviet Russia's emphasis on the training of mental retardates.

Turning to the U. S. Children's Bureau and its services I will hardly need to mention our keen disappointment that the Administration saw fit to ignore the action of the House and Senate in raising the ceilings for Maternal and Child Health, for Crippled Children and for Child Welfare Services. The situation is particularly critical with regard to Maternal and Child Health because of the crucial importance of the diagnostic mental retardation clinics which have been developed under this program. As you know, a number of States have not made even a beginning in this direction and yet all the MCH funds for this purpose have been committed. I do not like to use strong words, but it truly would be disastrous if the Administration's restrictive viewpoint would be upheld by Congress and no additional funds allocated for these programs.

I was very much interested that the Bayne-Jones Report on "The Advancement of Medical Research and Education" recommends that "The research program of the Children's Bureau be strengthened by enactment of legislation authorizing the Bureau to support research through grants and contracts, and that the funds available for the total research of the Bureau be expanded".

This recommendation makes good sense to me. The Bureau has done an outstanding job in its clinical demonstration projects and a good beginning in its own limited research activities. To complement these clinical demonstrations with research grants, to mention only one approach, would certainly tremendously enhance the long-range effectiveness of these programs.

As far as the programs of the National Institutes of Health are concerned, that is NIMH and NINDB, it would seem to me that just "holding the line" is not enough there. My friends in the research field have convinced me that it is essential to provide in any broad scale research program for a definite expansion over a minimum of five to ten years in order to pursue the "leads" developing from the original projects. Without room for such expansion and follow-up much of the value of the original project will be lost. I know of your strong awareness of these matters and hope you can convince your colleagues of the need for additional support for the Institutes.

I cannot tell you how much I appreciate the privilege of being able to write you so freely, and I hope you will not hesitate to tell me with equal frankness if you disagree with any of the points I have made in this letter.

You have been a wonderful friend to all of us and the mentally retarded and their families are forever indebted to you.

Cordially,

Jincent J. Fillzpatrick